Image# 15951124244		
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 18 (check only one)  17
Any information copied from such Reports and Statements n or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)  The Marty Meehan for Congress Commit	ittee	
Full Name (Last, First, Middle Initial)  A. Bethany Health Care Center  Mailing Address 97 Bethany Road		Date of Disbursement  10 28 2014
City State Framingham MA Purpose of Disbursement Donation  Candidate Name	Zip Code 01702 Category	Amount of Each Disbursement this Period  1000.00  Transaction ID: D748733
Office Sought:  House Senate President  State:  Disbursement For Primary Other (s	r: 2008 General	
Full Name (Last, First, Middle Initial)  Marty Meehan Educational Foundation  Mailing Address  11 Kearney Square 2nd Floor		Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City State Lowell MA  Purpose of Disbursement Donation  Candidate Name	Zip Code 01852 Category, Type	Amount of Each Disbursement this Period 5000.00  Transaction ID: D748384
Office Sought:  House Senate President  State:  Disbursement For Primary Other (s	r: 2008 General	
Full Name (Last, First, Middle Initial)  Massachusetts Democratic Party  Mailing Address 77 Summer St. 10th Floor		Date of Disbursement  M M / D D / Y Y Y Y Y Y 10 10 10 10 2014
Boston MA C Purpose of Disbursement Donation	ip Code 02110	Amount of Each Disbursement this Period 5000.00  Transaction ID: D748375
Candidate Name	Category	1

Category/ Type

Office Sought:

State:

House

Senate

District:

President

Disbursement For: 2014

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Primary

Other (specify)

X General

11000.00